

Procter & Gamble – I.P. Division**IMPORTANT CONFIDENTIALITY NOTICE**

The documents accompanying this telecopy transmission contain confidential information belonging to the sender which is legally protected. The information is intended only for the use of the individual or entity named below. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you have received this telecopy in error, please immediately notify us by telephone (collect) to arrange for return of the telecopied document to us.

**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8****RECEIVED
CENTRAL FAX CENTER****JUN 29 2005****TO: Examiner B. S. Carrillo - United States Patent and Trademark Office**

Fax No. 703-872-9306

Phone No. 571-272-1297

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on June 29, 2005, to the above-identified facsimile number.

 (Signature)

FROM: Leslie Pang for Thibault Fayette, Esq.

Fax No. 513-627-8118

Phone No. 513-627-4593

Listed below are the item(s) being submitted with this Certificate of Transmission:**

Number of Pages Including this Page: 16

- 1) Fee Transmittal Sheet (In dup.)
- 2) Petition for Ext. of Time (In dup.)
- 3) RCE Transmittal (In dup.)
- 4) Response (7 pgs.)
- 5) Declaration Under 37 C.F.R 1.132 (2 pgs)

Inventor(s): N. J. Policicchio et al.

S.N.: 10/782,322

Filed: February 19, 2004

Case: 9164M

Comments:**RECEIVED
OIPE/IAP****OFFICIAL PAPERS****JUN 30 2005**

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

FEE TRANSMITTAL for FY 2005 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
	Application Number	10/782,322
	Confirmation Number	6151
	Filing Date	February 19, 2004
	First Named Inventor	N. J. Policicchio et al.
	Examiner Name	B. S. Carrillo
	Art Unit	1746
TOTAL AMOUNT OF PAYMENT (\$) 1,240		Attorney Docket No. 9164M

RECEIVED
CENTRAL FAX CENTER
JUN 29 2005

METHOD OF PAYMENT		FEE CALCULATION (continued)																															
1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		5. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450) [450]</td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (e)</td> <td>(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other: Request for Continued Examination</td> <td>[790]</td> </tr> </tbody> </table>		Fee Description	Fee Paid	Extension for reply within 1 st month	(\$120) <input type="checkbox"/>	Extension for reply within 2 nd month	(\$450) [450]	Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (e)	(\$1,370) <input type="checkbox"/>	Other: Request for Continued Examination	[790]
Fee Description	Fee Paid																																
Extension for reply within 1 st month	(\$120) <input type="checkbox"/>																																
Extension for reply within 2 nd month	(\$450) [450]																																
Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>																																
Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>																																
Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>																																
Information Disclosure Statement fee	(\$180) <input type="checkbox"/>																																
37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>																																
37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>																																
Non-English specification	(\$130) <input type="checkbox"/>																																
Notice of Appeal	(\$500) <input type="checkbox"/>																																
Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>																																
Request for oral hearing	(\$1,000) <input type="checkbox"/>																																
Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (e)	(\$1,370) <input type="checkbox"/>																																
Other: Request for Continued Examination	[790]																																
FEE CALCULATION 2. BASIC FILING FEE - Large Entity <table border="1"> <thead> <tr> <th></th> <th>FILING FEE</th> <th>SEARCH FEE</th> <th>EXAMINATION FEE</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>(\$300)</td> <td>(\$500)</td> <td>(\$200)</td> <td>(Total = \$1000) <input type="checkbox"/></td> </tr> <tr> <td>Design</td> <td>(\$200)</td> <td>(\$100)</td> <td>(\$130)</td> <td>(Total = \$430) <input type="checkbox"/></td> </tr> <tr> <td>Reissue</td> <td>(\$300)</td> <td>(\$500)</td> <td>(\$600)</td> <td>(Total = \$1400) <input type="checkbox"/></td> </tr> <tr> <td>Provisional filing fee</td> <td></td> <td></td> <td></td> <td>(Total = \$200) <input type="checkbox"/></td> </tr> </tbody> </table>			FILING FEE	SEARCH FEE	EXAMINATION FEE	Fee Paid	Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>	Provisional filing fee				(Total = \$200) <input type="checkbox"/>							
	FILING FEE	SEARCH FEE	EXAMINATION FEE	Fee Paid																													
Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>																													
Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>																													
Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>																													
Provisional filing fee				(Total = \$200) <input type="checkbox"/>																													
3. APPLICATION SIZE FEE: Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$)[0]																																	
4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$)[0]			Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>																
	Extra Claims	Fee from Below	Fee Paid																														
Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>																														
Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>																														
Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>																														
SUBTOTAL (4) (\$)[0]		SUBTOTAL (5) (\$)[1240]																															

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Thibault Bayette	Registration No.	56,143
Signature		(Attorney/Agent)	
		Telephone	(513) 627-4593
		Date	June 29, 2005

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, 1100 Pennsylvania Avenue, N.W., Washington, D.C. 20540.